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 a copy of this leaflet.

EDITORIALS*

FEDERAL EMERGENCY RELIEF ADMINISTRATION—CALIFORNIA MEDICAL ASSOCIATION COÖPERATION

The Problem of the Federal Emergency Relief Administration.—The large number of citizens who have been unemployed for such long periods that their financial resources are today practically nil, during the last year has become so serious a matter to both state and local governments that the Federal Emergency Relief Administration has found it necessary to take an active part in handling the situation.

The Federal Government has decreed that its moneys, when provided for unemployment relief by state and local committees, may also be used for medical relief, subject to certain principles and rules to be drafted for each commonwealth through its state emergency relief administrator. The new federal rules make it possible to give professional services in medicine and surgery to unemployed persons, in their homes, just as if they were patients, in private practice, who called in their own physicians and themselves paid for the professional services rendered.

Nature of the Federal Medical Relief to Unemployed Citizens.—It must be remembered that

* Editorials on subjects of scientific and clinical interest, contributed by members of the California Medical Association, are printed in the Editorial Comments column, which follows.

what is here commented upon is home care, not hospitalization, and of special interest are the September rules of the Federal Emergency Relief Administration set forth under its "Policy," containing the following important paragraphs:†

1. *Policy.*—A uniform policy with regard to the provision of medical, nursing, and dental care for indigent persons in their homes shall be made the basis of an agreement between the relief administration and the organized medical, nursing, and dental professions, state and/or local. The essence of such a policy should be:

(a) An agreement by the relief administration to recognize within legal and economic limitations the traditional family and family-physician relationship in the authorization of medical care for indigent persons in their homes; the traditional physician-nurse relationship in the authorization of bedside nursing care; the traditional dentist-patient relationship in the authorization of emergency dental care; and

(b) An agreement by the physician, nurse (or nursing organization) and dentist to furnish the same type of service to an indigent person as would be rendered to a private patient, but that such authorized service shall be a minimum consistent with good professional judgment and shall be charged for at an agreed rate which makes due allowance for the conservation of relief funds.

The common aim should be the provision of good medical service at a low cost—to the mutual benefit of indigent patient, physician, nurse, dentist, and taxpayer. . . .

* * *

How the California Medical Association Has Coöperated.—In California the State Emergency Relief Administrator, Mr. R. C. Branion, has already held a number of conferences with representatives of the California Medical Association, and with their coöperation worked out a plan of operation. As a further result, at a meeting of the Executive Committee on August 19, Dr. T. Henshaw Kelly, chairman of the Association Council, submitted a plan and rules for use in California; and the Council, at its meeting in Los Angeles on September 30, 1933, approved the same. This plan, as outlined under Item 3 of the minutes of August 19, is printed in the Miscellany department of this issue (page 358).

The drafting of these rules meant much work for those officers of the California Medical Association who had the matter in hand. An earnest effort was made to visualize all aspects of the needs of the unemployed who were sick, and by the establishment of mutual and harmonious relations and coöperation with the Department of the California Relief Administrator, Mr. R. C. Branion, to provide them with adequate medical care.

COUNTY HEALTH AND INSTITUTIONS COMMISSIONS—SANTA CLARA'S EXAMPLE

The Value of an Institutions Commission.—In Santa Clara County a new charter has been under consideration by a duly elected Board of Freeholders. Alert to its responsibilities, the Santa Clara County Medical Society, in coöperation with social workers and nurses' organizations, recently held a meeting at San Jose, to which the members

† For the basic rules and regulations governing medical care provided in the home to recipients of unemployment relief, see *Journal of the American Medical Association*, September 23, 1933, page 1026.